

NORTHERN CALIFORNIA JOINT APPRENTICESHIP COMMITTEE

14738 Cantova Way ~ Sloughhouse, CA 95683 ~ (916) 354-2029 FAX (916) 354-1126

80 HOUR LETTER OF UNDERSTANDING (Employer Referral)

This Agreement enter	ed into this	day of		, 20
between the Operating Eng	ineers Joint Apprentic	eship Committee for	Northern Ca	lifornia, hereinafter referred to
as "JAC" and				
hereinafter referred to as "E	mployer".			
Applicant must have worl	ked for the referring e	employer for at leas	st two (2) yea	ars. Applicant must provide
a resume and must have a	_	_	-	
Employer Address:		City:		Zip:
Phone Number:	CEAN*(CA E			
1. Pursuant to the JAC Employer Referral Appl	Standards, the Employ	ver has requested th	at the JAC ind	
Employee Name:				Date of Birth:
Address:		Ci	ty:	Zip:
Phone Number:	District:	Branch:	Ethnic:	Gender:

Initial **2.** The Employer recognizes that by making such a request, he has referred an Applicant under the provisions of the JAC Standards for "Employer Referrals". <u>The Employer certifies that the Applicant has been employed by the referring employer and that said Applicant is familiar with the work of an <u>Operating Engineer.</u></u>

3. In consideration of the JAC waiving the eight-week POP Program at RMTC, the Employer agrees to retain the services of the Employer Referral Applicant for his/her entire POP period (i.e.: 1600 hours) unless said apprentice shall have been: 1) laid off due to lack of work and the Employer is in compliance with its apprentice manning requirements, or 2) terminated for just cause by the employer.

4. The Employer is aware that when this Applicant is indentured into the Apprenticeship Program, he/she will be required to complete <u>320</u> hours of <u>Supplemental Related Training (SRT)</u>, and that as an apprentice he/she will be dispatched to Rancho Murieta Training Center <u>four times (80 hours per class)</u> during his/her Apprenticeship Program at the direction of the JAC.

Employer Initial

Note: A completed Standard Apprenticeship Application and a current CA DMV printout <u>must</u> be supplied by the Applicant with this Employer Referral Application. Any Employer Referral Application not accompanied by a standard application and DMV printout will not be accepted.

Employer Signature	Date	Print Name & Title	Print Name & Title		
District Coordinator Signature	Date				
* CEAN can be found on your DE-6 form and is in this format: XXX-XXX-X		Signed By: Director of Apprenticeship Date			